

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 100201724-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I beli we lam the original, first and sole inventor (if only one name is listed below) or an original, first

| | -L | The following have in | chooked: | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| • | ch is attached hereto unless | | • | | | |
| () was filed on Number | () was filed on as US Application No. or PCT International Application Number and was amended on (if applicable). | | | | | |
| including the claims, as | amended by any amendme which is material to patentab | nt(s) referred to abo | e above-identified specification bye. I acknowledge the duty CFR 1.56. | | | |
| I hereby claim foreign priority inventor(s) certificate listed be | benefits under Title 35. United Sta | any foreign application fo | any foreign application(s) for patent r patent or inventor(s) certificate havi | | | |
| COUNTRY | APPLICATION NUMBER | DATE FILED | PRIORITY CLAIMED UNDER 35 U.S.C. 119 | | | |
| | | | YES: NO: | | | |
| | | | YES: NO: | | | |
| | APPLICATION NUMBER | FILING DATE | | | | |
| hereby claim the benefit unde below: | er Title 35, United States Code Sec | tion 119(e) of any Unite | d States provisional application(s) list | | | |
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| APPLICATION NUMBER | FILING DATE | STATUS (patented/pending/abandoned) | | | | |
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| s a named inventor. I hereby | mark Office connected therewith: | and/or agent(s) to prose Place Customer Number Bar Code Label here | ecute this application and transact a | | | |
| s a named inventor, I hereby usiness in the Patent and Trade Customer Nur | mark Office connected therewith: | Place Customer Number Bar Code | | | | |
| s a named inventor, I hereby siness in the Patent and Trade Customer Nur Send Correspondence to: HEWLETT-PACKARD COMPA | mark Office connected therewith: mber 022879 | Place Customer Number Bar Code Label here Direct Telephore | ne Calls To: | | | |
| s a named inventor, I hereby siness in the Patent and Trade Customer Nur Send Correspondence to: HEWLETT-PACKARD COMPAINTELECTUAI Property Administ P.O. Box 272400 | mark Office connected therewith: mber 022879 ANY ration | Place Customer Number Bar Code Label here Direct Telephor Lloyd E. Dakin | ne Calls To: | | | |
| s a named inventor, I hereby siness in the Patent and Trade Customer Nur Send Correspondence to: HEWLETT-PACKARD COM Paintellectual Property Administ | mark Office connected therewith: mber 022879 ANY ration | Place Customer Number Bar Code Label here Direct Telephore | ne Calls To: Jr. | | | |
| Send Correspondence to: HEWLETT-PACKARD COMPA Intellectual Property Administ P.O. Box 272400 Fort Collins, Colorado 80527 hereby declare that all st ade on information and ith the knowledge that porisonment, or both, un | mark Office connected therewith: mber 022879 ANY ration 2-2400 at ements made herein of my belief are believed to be to willful false statements a | Place Customer Number Bar Code Label here Direct Telephor Lloyd E. Dakin (650) 857-229 y own knowledge a ue; and further that nd the like so ma 8 of th United Sta | Jr. Jr. The true and that all statement these statements were mad de are punishable by fine cottes Code and that such willful | | | |
| Send Correspondence to: HEWLETT-PACKARD COMPA Intellectual Property Administ P.O. Box 272400 Fort Collins, Colorado 80527 hereby declare that all st ade on information and ith the knowledge that aprisonment, or both, und lse statements may jeopa | mark Office connected therewith: mber 022879 ANY ration 2-2400 at ements made herein of my belief are believed to be to willful false statements a der Section 1001 of Title 18 ardize the validity of the app | Place Customer Number Bar Code Label here Direct Telephor Lloyd E. Dakin (650) 857-229 y own knowledge a ue; and further that nd the like so ma 8 of th United Sta | Jr. 15 The true and that all statement these statements were madded are punishable by fine of the code and that such willfunt issued thereon. | | | |
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| Customer Nur Send Correspondence to: HEWLETT-PACKARD COMPA Intellectual Property Administ P.O. Box 272400 Fort Collins, Colorado 80527 hereby declare that all st ade on information and ith the knowledge that prisonment, or both, und lise statements may jeopa Il Name of Inventor. Cullen E sidence: 662 M | mark Office connected therewith: mber 022879 ANY ration 2-2400 at ements made herein of my belief are believed to be to willful false statements a der Section 1001 of Title 18 ardize the validity of the app | Place Customer Number Bar Code Label here Direct Telephor Lloyd E Dakin (650) 857-229 y own knowledge a ue; and further that nd the like so ma 8 of th United Sta lication or any pater Citizenship: US | Jr. 15 The true and that all statement these statements were made are punishable by fine of the code and that such willfunt issued thereon. | | | |

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (c ntinued)

ATTORNEY DOCKET NO. 100201724-1

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| Inventor's Signature | | Date | | | |
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| mvento s organica e | | Date | • | | |
| | | | · | | |
| Full Name of # 5 joint inventor: | | | Citizenship: | | |
| Residence: | | | | | |
| Post Office Address: . | | | | | |
| Inventor's Signature | • | Date | | | |
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| Residence: | | | | | |
| Post Office Address: | | | | | |
| nventor's Signature | | Date | · · · · · · · · · · · · · · · · · · · | | |
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| nventor's Signature | 4 | Date | | | |
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| nventor's Signature | · · · · · · · · · · · · · · · · · · · | Date | | | |